



County of San Bernardino

**F A S
STANDARD CONTRACT**

E <input checked="" type="checkbox"/> New M <input type="checkbox"/> Change X <input type="checkbox"/> Cancel		Vendor Code HUNTING562		S C	Dept.	A	Contract Number		
County Department PROBATION					Dept. Orgn.		Contractor's License No.		
County Department Contract Representative P. JOSEPH LENZ					Ph. Ext. 387-5853		Amount of Contract \$120,000		
Fund AAA	Dept. PRB	Organization PRB	Appr. 20 0	Obj/Rev Source 24/24	Activity	GRC/PROJ/JOB Number			
Commodity Code				Estimated Payment Total by Fiscal Year					
Project Name Huntington Transcription Service				FY	Amount	I/D	FY	Amount	I/D
				_____	_____	_____	_____	_____	_____
				_____	_____	_____	_____	_____	_____
				_____	_____	_____	_____	_____	_____

THIS CONTRACT is entered into the State of California by and between the County of San Bernardino, hereinafter called the County, and

Name

Huntington Transcription Service

hereinafter called _____

Address

1450 West Colorado Boulevard, Suite 100

Pasadena, California 91105-1414

Phone

(626) 792-7250

Birth Date

Federal ID No. or Social Security No.

954633562

IT IS HEREBY AGREED AS FOLLOWS:

(Use space below and additional bond sheets. Set forth service to be rendered, amount to be paid, manner of payment, time for performance or completion, determination of satisfactory performance and cause for termination, other terms and conditions, and attach plans, specifications, and addenda, if any.)

THIS AGREEMENT is entered into effective March 16, 1999, by and between the County of San Bernardino Probation Department and Huntington Transcription Services, hereinafter known as Contractor.

WITNESSETH: WHEREAS, the Probation Department concludes pre-sentence and supplemental investigations for the Superior Courts and reports are dictated for transcription and preparation for submission as documents to the Court.

WHEREAS, Contractor has the experience, capability and personnel to transcribe the dictation in a manner satisfactory to the Probation Department.

NOW, THEREFORE, the parties hereto do mutually agree to the terms and conditions as follows:

SEE ATTACHED

COUNTY OF SAN BERNARDINO

Chairman, Board of Supervisors

Dated_____

SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD.
Clerk of the Board of Supervisors of the County of
San Bernardino.

By_____

(State if corporation, company, etc.)

By_____
(Authorized Signature)

Dated_____

Title_____

Address_____

Deputy

Approved as to Legal Form

Reviewed as to Affirmative Action

Reviewed for Processing


County Counsel




Agency Administrator/CAO

Date

Date

Date